

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE: Application of : Tyrone A. Silva
 Serial No. : Applied For
 Filing Date :
 For : COORDINATIVE DENTAL DIE
 INTERLOCKING SYSTEM
 Atty. Docket No. : 99-4444

**COMBINED DECLARATION AND POWER OF ATTORNEY
IN ORIGINAL APPLICATION**

As below named Inventor, I hereby declare that:

My address and citizenship is as stated below next to my name; that

I verily believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the invention entitled "**COORDINATIVE DENTAL DIE INTERLOCKING SYSTEM**" described and claimed in the above-referenced application, that I have reviewed and understand the contents, including claims, of the above-referenced application, that I do not know and do not believe that same was ever known or used in the United States of America before my invention thereof or more than one year prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal representatives or assigns more than twelve months prior to

this application, that I acknowledge my duty to disclose information of which I am aware which is material to the examination of this application in accordance with 37 C.F.R. §1.56(a), and that no application for patent or inventor's certificate of this invention has been filed in any country foreign to the United States of America prior to this application by myself or my legal representatives or assigns except as follows:

NONE

I hereby appoint the following attorney to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

EDWARD M. LIVINGSTON, ESQUIRE, No. 28,523.

Address all correspondence to the above-referenced attorney at 628 Ellen Drive, Post Office Box 1599, Winter Park, Florida, 32790; telephone number (407) 629-4545.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under Section 1001 of Title 18 of the *United States Code* and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

The name, address of residence, mailing address, and country of citizenship
of the Inventor is as follows:

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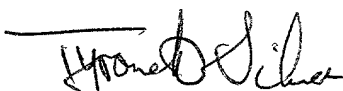
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